

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | PS | 66621 | 8/11/17 |
| O.I.P.E. CLASSIFIER | | 20 | |
| FORMALITY REVIEW | LT | JC 832 | 9-26-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------------|--------|
| Final Original | |
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| 2 | 3/3/04 |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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